10/586521 IAP11 Rec'd PCT/PTO 19 JUL 2006

APPLICATION DATA SHEET

Application Information

Regular
Utility
None
No
SWITCHING DEVICE
1034456-000041
No
No
No

Latin Name::	
Variety Denomination Name::	
Petition Included?::	No
Petition Type::	
Licensed US Govt. Agency::	
Contract or Grant Numbers::	
Secrecy Order in Parent Appl.?::	No
Applicant Information	
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Given Name::	Rainer
Middle Name::	
Family Name::	KOLMONEN
Name Suffix::	
City of Residence::	Laihia
State or Province of Residence::	
Country of Residence::	Finland
Street of Mailing Address::	Urputie 3 as 1
City of Mailing Address::	Laihia
State or Province of Mailing Address::	

Country of Mailing Address::	Finland
Postal or Zip Code of Mailing Address::	FI-66400
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Given Name::	Aki
Middle Name::	
Family Name::	SUUTARINEN
Name Suffix::	
City of Residence::	Vaasa
State or Province of Residence::	
Country of Residence::	Finland
Street of Mailing Address::	Pihkatie 12 A 5
City of Mailing Address::	Vaasa
State or Province of Mailing Address::	
Country of Mailing Address::	Finland
Postal or Zip Code of Mailing Address::	FI-65320
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity

Given Name::

Jarkko

Middle Name::	
Family Name::	ALANEN
Name Suffix::	
City of Residence::	Ylihärmä
State or Province of Residence::	
Country of Residence::	Finland
Street of Mailing Address::	Koukkulomantie 301
City of Mailing Address::	Ylihärmä
State or Province of Mailing Address::	
Country of Mailing Address::	Finland
Postal or Zip Code of Mailing Address::	FI-62375
Applicant Authority Type::	Inventor
Primary Citizenship Country::	Finland
Status::	Full Capacity
Given Name::	Harri
Middle Name::	
Family Name::	MATTLAR
Name Suffix::	
City of Residence::	Iskmo
State or Province of Residence::	
Country of Residence::	Finland

Street of Mailing Address:: Jungsundsvägen 809

City of Mailing Address:: Iskmo

State or Province of Mailing

Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing

Address::

FI-65760

Correspondence Information

Correspondence Customer Number:: 21839

Phone Number:: 703 836 6620

Fax Number: 703 836 2021

Representative Information

Representative Customer Number:: 21839

Domestic Priority Information

Application:: Continuity Type:: Parent Application:: Parent Filing

Date::

This Application National Stage of PCT/FI2005/000031 01/18/05

Foreign Priority Information

Country:: Application Number:: Filing Date:: Priority

Claimed::

Finland 20040067 01/19/04 Yes

Assignee Information

Assignee Name:: ABB OY

Street of Mailing Address:: Strombergintie 1

City of Mailing Address:: Helsinki

State or Province of Mailing

Address::

Country of Mailing Address:: Finland

Postal or Zip Code of Mailing

Address::

FI-00380